COUNTY OF SAN DIEGO CUPA

DEPARTMENT OF ENVIRONMENTAL HEALTH – HAZARDOUS MATERIALS DIVISION
P.O. Box 129261, San Diego, CA 92112-9261
(619) 338-2222; Toll free 1-800-253-9933; Fax (619) 338-2377

http://www.sdcdeh.org

OFFICE USE ONLY

Unified Program Facility Permit #

Plan Check Permit #.

PART I -UNDERGROUND STORAGE TANK PLAN CHECK PERMIT APPLICATION

GENERAL INFORMATION				
FACILITY NAME: APN:				
FACILITY ADDRESS: Street Number Street Name City Zip Code				
TANK OWNER		TANK OPERATOR		
Name:	TAIN OWNER	Name:		
Address:				
		Address:		
City:	State: Zip:	City: State: Zip:		
Phone: () E-Mail: Phone: () E-Mail:				
CONTRACTOR INFORMATION				
Contractor Name: Contact Name:				
Mailing Address:	City:	State: Zip:		
Phone:	License #:	E-mail:		
Haz removal certif	ficate #: Worker Comp. Insurance Co.:	ICC Installers Certification:		
SCOPE OF WORK (Check all that apply)				
☐ TANK INSTALLATION ☐ TANK SYSTEM UPGRADE ☐ New Tank Installation Only ☐ Installation of Dispenser Contain ☐ Tank(s) Replacement (remove and install) ☐ Installation of Double-wall Pipin ☐ TANK CLOSURE ONLY Comments:		ntainment □ Install Electronic in-line Leak Detection □ Install New Monitoring System or composition □ Repair □ Secondary Containment Repair □ Repair sump(s): How many?	Repair sump(s): How many? Repair Under Dispenser Containment: How many?	
Activity Code NEW UST CONSTRUCTION (COMPLETE APPLICATION PART II: HM-9312) Fees				
428T21	Installation fee for first tank (also applies to tank repair		\$	
420121	Each additional tank	No. of tank(s) x \$418.00	\$	
	Establishment Base Fee (applies to establishments not currently under permit with DEH) \$227.00 \$ Operating Permit Fee per tank (Does not apply to replacement tanks if the existing			
	tank(s) be replaced paid current operating permit for		\$	
	CUPA Surcharge - Program Oversight-Hazmat (Pe		\$	
	CUPA Surcharge - Underground Storage Tanks (P		\$	
UST CLOSURE (COMPLETE APPLICATION PART III: HM-9313)				
428T23	Closure fee for first tank	\$860.00 No. of tanks(s) x \$384.00	\$	
	Each additional tank UPGRADE / REPAIR (COMPLETE	(/	Ψ	
428T29	Upgrade /Repair – 1 inspection	\$1108.00	\$	
428T24	Upgrade /Repair – 2 inspections	\$1544.00	\$	
MISCELLANEOUS ACTIVITIES				
	Additional inspection(s): Soil sampling Press./	•	\$	
	Plan Re-Review	\$452.00	\$	
	Re-inspection Fee	\$700.00	\$	
	Consultation Fee (minimum 2 hours)	No. of hours x \$119.00	\$	
	Investigative Fee	TOTAL FEE	¥	
PERMITS REQUIRED BY OTHER AGENCIES: FIRE DEPT APCD BUILDING DEPT OTHER Provide copies of approved applications from these departments and others if permits are needed. Submit one (1) original and two (2) copies of this application package, including plan drawings with the required fee. Make checks payable to the County of San Diego. A permit will be issued by DEH upon review and approval of the application and plans. Applicable fees must be submitted with the application package. Additional information to that presented in the application package may be needed in order to obtain final approval. No work is to begin on the proposed project until a permit has been issued. OFFICE USE: DATE RECEIVED: // CHECK NO. PLAN APPROVED: PLAN APPROVED:				
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